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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

**NONE**

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

FRANCE 02 08513 07/05/2002 **ACH**

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <b>ACH</b> Examiner's Signature _____ Initials _____	FRANCE	2	8	1

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## TITLE

Method for radiological examination of an object

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees
RECEIVED	No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> 1.16 Fees ( Filing )
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